STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Official Use Only

COVER PAGE

Please type or print in ink.			2018 MAR 26 PH (MBDLE) U	
NAME OF FILER (LAST)		(FIRST)	·· · · · · · · · · · · · · · · · ·	CO (MIDDLE) U
Abdulrahman		Abdulmageed		
1.	Office, Agency, or Court			RECOLECTION .
	Agency Name (Do not use acronyms)			
	Natural Resources Agency-Department of Conservation			
	Division, Board, Department, District, if applicable		Your Position	
	Division of Oil, Gas and Geothermal I	Resources	Associate Oil and Gas Eng	gineer
	If filing for multiple positions, list below or on an attachment. (Do not use acronyms)			
	Agency:		Position:	
2. Jurisdiction of Office (Check at least one box)				
	▼ State		☐ Judge or Court Commissioner (St	atewide Jurisdiction)
	Multi-County		County of	
	City of			
	College of the colleg		Other	
3.	Type of Statement (Check at least one box)			
	X Annual: The period covered is January 1, 2	017, through	Leaving Office: Date Left	
	December 31, 2017.		(Check one)	
	The period covered is/	, through	 The period covered is Januar leaving office. 	y 1, 2017, through the date of
	Assuming Office: Date assumed/_		 The period covered is the date of leaving office. 	/, through
	Candidate: Date of Election and office sought, if different than Part 1:			
4. Schedule Summary (must complete) ► Total number of pages including this cover page:1				
	chedules attached			
	Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – sched			s Positions – schedule attached
			iedule D - Income - Gifts - schedule	
	Schedule B - Real Property - schedule a		edule E - Income – Gifts – Travel Pa	
-or-				
	✓ None - No reportable interests on any schedule			
5.	Verification			
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document	CITY	STATE	ZIP CODE
	5816 Corporate Ave, Suite 100	Cypress	CA	90630
	DAYTIME TELEPHONE NUMBER		IL ADDRESS	
(714) 816-7824				
	have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained erein and in any attached schedules is true and complete. I acknowledge this is a public document.			
	certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
	ate Signed 3/22/2018 Signature Addle			
_	(month, day, year)		(File the originally signed statem	ent with your filing official.)

FPPC Form 700 (2017/2018) FPPC Advice Email: advice@fppc.ca.gov

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